



Application for Exemption of Personal Property Tax

Richard W. Bradshaw
Commissioner of the Revenue
PO Box 283
Williamsburg, VA 23187-0283
Phone: (757) 253-6695 Fax: (757) 253-6733

Date: _____ Account No. _____

Name(s) of Owner(s): _____

Mailing Address: _____

Social Security Number(s): _____

Telephone Number: _____

VEHICLE INFORMATION:

Year: _____ Make: _____ Model: _____

State License No.: _____

Vehicle Identification No.: _____

BASIS FOR EXEMPTION: (PLEASE CHECK ONE)

☐ Special equipped vehicle (Attach proof of equipment installed)

☐ Disabled Veteran (First-time filers attach Certification of Disability)

CERTIFICATION:

I certify that the information on this personal property return is true and correct. I understand that it is my responsibility to immediately inform the Commissioner of the Revenue of any material changes which affect the taxation of this vehicle.

Signature of Owner(s): _____
